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Fill in this information to identify your case:	
United States Bankruptcy Court for the:  Northern District of: Illinois (State)	
Case number (if known)	Chapter you are filing under:
	Chapter 7 Chapter 11 Chapter 12 Chapter 13

#### Official Form 101

### Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	art 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name	Samuel	
	Write the name that is on	First name	First name
	your government-issued picture identification (for	Middle name	Middle name
	example, your driver's	Wade	
	license or passport	Last name	Last name
	Bring your picture identification to your meeting with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2.	All other names you		
	have used in the last	First name	First name
	8 years		
	Include your married or	Middle name	Middle name
	maiden names.		
		Last name	Last name
		First name	First name
		That hane	Histilane
		Middle name	Middle name
		Last name	Last name
3.	Only the last 4 digits of your Social	XXX - XX- 8019	xxx - xx-
	Security number or federal Individual	OR	OR
	Taxpayer Identification number (ITIN)	9 xx - xx-	9 xx - xx-

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Debtor 1 Samuel First Name	Wade Middle Name Last Name	Case number (if known)
	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4. Any business names and Employer	I have not used any business names or EINs.	I have not used any business names or EINs.
Identification Numbers (EIN) you have used in the last	Business name	Business name
8 years Include trade names and	Business name	Business name
doing business as names	EIN	EIN
	EIN	EIN
5. Where you live	1914 S 57th Ct FI 1	If Debtor 2 lives at a different address:
	Number Street	Number Street
	Cicero Illinois 60804 City State Zip Code	City State Zip Code
	Cook County	County
	If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
	Number Street	Number Street
	City State Zip Code	City State Zip Code
<ol> <li>Why you are choosing this district</li> </ol>	Check one:	Check one:
to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
	I have another reason. Explain. (See 28 U.S.C. §§ 1408.)	I have another reason. Explain. (See 28 U.S.C. §§ 1408.)

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Debtor 1 Samuel			Case number (if kno	own)
First Name	Middle Name	Last Name		
Part 2: Tell the Court Abo	out Your Bankruptcy Case	;		
7. The chapter of the Bankruptcy Code you are choosing to file under		cription of each, see <i>Notice Requ</i> Also, go to the top of page 1 and		C. § 342(b) for Individuals Filing for opriate box.
8. How you will pay the fee	more details about how cashier's check, or more may pay with a credit of the land of the l	w you may pay. Typically, if you ney order If your attorney is card or check with a pre-printer in installments. If you choose ar Filing Fee in Installments (Orbe waived (You may request required to, waive your fee, and that applies to your family sin, you must fill out the Applic	ou are paying the submitting you ed address. ethis option, sign official Form 103 this option only ad may do so onlize and you are used and are used and you ar	the clerk's office in your local court for e fee yourself, you may pay with cash, it payment on your behalf, your attorney an and attach the <i>Application for AA</i> ).  If you are filing for Chapter 7. By law, a ly if your income is less than 150% of unable to pay the fee in installments). If the Chapter 7 Filing Fee Waived (Official
9. Have you filed for bankruptcy within the last 8 years?	No.  Yes. District  District  District	When When When	MM / DD / YYYY  MM / DD / YYYY  MM / DD / YYYY	Case number  Case number  Case number
10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	Ves. Debtor District Debtor District	WhenWhen	MM / DD / YYYY	Relationship to you  Case number, if known  Relationship to you  Case number, if known
11. Do you rent your residence?	✓ No. Go to line  Yes. Fill out <i>Ini</i>	e 12.		b you want to stay in your residence?  St You (Form 101A) and file it with

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Wade Debtor 1 Samuel \_\_ Case number (if known) Middle Name First Name Last Name Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole No. Go to Part 4. **✓** proprietor of any fullor part-time Yes. Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than City State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set Chapter 11 of the appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance **Bankruptcy Code and** sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). are you a small business debtor? No. I am not filing under Chapter 11. V For a definition of small business debtor, No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the see 11 U.S.C. § Bankruptcy Code. 101(51D). Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have **V** No. any property that Yes. What is the hazard? poses or is alleged to pose a threat of imminent and If immediate attention is needed, why is it needed? identifiable hazard to public health or safety? Or do you Where is the property? own any property Street Number that needs immediate attention? For example, do you own perishable goods, City State Zip Code or livestock that must be fed, or a building that needs urgent repairs?

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 Debtor 1 First Name
 Samuel Middle Name
 Wade Last Name
 Case number (if known)

Pa	rt 5: Explain Your Effor	rts to Receive a Brie	fing About Credit Counseling				
		About Debtor 1:		Al	bout Debtor 2 (Sp	oouse Only in a Joint Case):	
15.	Tell the court	You must check one:		Yo	ou must check one:		
	whether you have received briefing about credit counseling.	counseling agen	ing from an approved credit cy within the 180 days before I ptcy petition, and I received a npletion.		counseling ager	ing from an approved credit ncy within the 180 days before I ptcy petition, and I received a npletion.	
	The law requires that you receive a briefing		he certificate and the payment plan, veloped with the agency.			he certificate and the payment plan, veloped with the agency.	
	about credit counseling before you file for bankruptcy. You must truthfully	counseling agen	ing from an approved credit cy within the 180 days before I ptcy petition, but I do not have a npletion.		counseling ager	ring from an approved credit ncy within the 180 days before I ptcy petition, but I do not have a npletion.	
fo y	check one of the following choices. If you cannot do so, you are not eligible to file.		er you file this bankruptcy petition, opy of the certificate and payment			er you file this bankruptcy petition, opy of the certificate and payment	
	If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your	from an approve obtain those ser made my reques	ked for credit counseling services d agency, but was unable to vices during the 7 days after I t, and exigent circumstances emporary waiver of the		from an approve obtain those ser made my reques	ked for credit counseling services ed agency, but was unable to vices during the 7 days after I st, and exigent circumstances emporary waiver of the	
cre	creditors can begin collection activities again.	requirement, attac efforts you made t unable to obtain it	ay temporary waiver of the ch a separate sheet explaining what to obtain the briefing, why you were before you filed for bankruptcy, and imstances required you to file this		requirement, attace efforts you made unable to obtain it	ay temporary waiver of the ch a separate sheet explaining what to obtain the briefing, why you were before you filed for bankruptcy, and umstances required you to file this	
			e dismissed if the court is dissatisfied for not receiving a briefing before ruptcy.			e dismissed if the court is dissatisfied for not receiving a briefing before ruptcy.	
		receive a briefing must file a certifica with a copy of the	fied with your reasons, you must still within 30 days after you file. You ate from the approved agency, along payment plan you developed, if any. o, your case may be dismissed.		receive a briefing must file a certification with a copy of the	fied with your reasons, you must still within 30 days after you file. You ate from the approved agency, along payment plan you developed, if any. o, your case may be dismissed.	
			ne 30-day deadline is granted only mited to a maximum of 15 days.		Any extension of the 30-day deadline is grar for cause and is limited to a maximum of 15		
		I am not required counseling beca	d to receive a briefing about credit use of:		I am not required counseling beca	d to receive a briefing about credit ause of:	
		☐ Incapacity.	I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.		Incapacity.	I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.	
		Disability.	My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.		Disability.	My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.	
		Active duty.	I am currently on active military duty in a military combat zone.		Active duty.	I am currently on active military duty in a military combat zone.	
		about credit coun	are not required to receive a briefing seling, you must file a motion for punseling with the court.		about credit cour	are not required to receive a briefing seling, you must file a motion for ounseling with the court.	

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Wade Debtor 1 Samuel Case number (if known) Middle Name First Name Last Name Part 6: **Answer These Questions for Reporting Purposes** 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as 16. What kind of debts do incurred by an individual primarily for a personal, family, or household purpose." you have? No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 17. Are you filing under No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative after any exempt expenses are paid that funds will be available to distribute to unsecured creditors? property is excluded No. and administrative expenses are paid that Yes. funds will be available for distribution to unsecured creditors? **7** 1-49 1,000-5,000 25,001-50,000 18. How many creditors 50-99 5,001-10,000 50,001-100,000 do you estimate that 100-199 10,001-25,000 More than 100,000 you owe? 200-999 \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 19. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your assets \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion to be worth? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 20. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your liabilities to be? \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion Sign Below Part 7: I have examined this petition, and I declare under penalty of perjury that the information provided is true and For you correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. X X /s/ Samuel Wade Signature of Debtor 1 Signature of Debtor 2 Executed on \_ 8/31/2017 Executed on MM / DD / YYYY MM / DD / YYYY

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Debtor 1 Samuel		Wade	Case number (if	f known)
First Name	Middle Name	Last Name		
For your attorney, if you are represented by one	eligibility to proceed und	ler Chapter 7, 11, 12,	or 13 of title 11, Unite	nave informed the debtor(s) about ad States Code, and have explained the also certify that I have delivered to the
If you are not	debtor(s) the notice requi	ired by 11 U.S.C. § 34	42(b) and, in a case in v	which § 707(b)(4)(D) applies, certify that I
represented by an	have no knowledge after	an inquiry that the in	formation in the sched	dules filed with the petition is incorrect.
attorney, you do not				·
need to file this page.	/s/ Chad Mizelle		Date _	8/31/2017
	Signature of Attorney for	or Debtor		MM / DD / YYYY
	-			
	Chad Mizelle			
	Printed name			
	Semrad Law Firm			
	Firm name			
	20 S. Clark Street			
	Street			
	28th Floor			
	Chicago		Illinois	60603
	City		State	Zip Code
	_			
	Contact phone		Email address	cmizelle@semradlaw.com
	Daywarday		Illinois	<u> </u>
	Bar number		State	

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Fill in this information to identify your case:							
Debtor 1	Samuel		Wade				
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse, if filing)	First Name	Middle Name	Last Name				
United States E	Bankruptcy Court for the:	Northern	District of Illinois				
			(State)				
Case number (If known)							

	Check if	this	is	an
_	amende	d filir	ng	

### Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information 12/

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Your assets Value of what you own
\$0.00
\$17,390.00
\$17,390.00
Your liabilities Amount you owe
\$21,667.00
\$7,000.00
\$10,587.00
\$39,254.00
00.447.40
\$2,417.48 ————————————————————————————————————
\$1,762.00

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Deb	tor 1 Samuel		Wade	Case number (if known)						
	First Name	Middle Name	Last Name							
Part	4: Answer These Que	estions for Administrat	ive and Statistical Reco	ras						
6. <b>A</b>	re you filing for bankruptc	y under Chapters 7, 11, o	r 13?							
Г	No. You have nothing to	report on this part of the fo	rm. Check this box and subm	it this form to the court with your other sc	hedules.					
- [-	Yes.									
		_								
7. <b>W</b>	/hat kind of debt do you ha	ave?								
Ŀ			mer debts are those incurred be ill out lines 8-10 for statistical	by an individual primarily for a personal, purposes. 28 U.S.C. § 159.						
				nis part of the form. Check this box and su	ıhmit					
	this form to the court wit	-	a navo nouning to roport on a	no part of the form. Onesk the box and of						
0 1	From the Statement of Vo.	Current Monthly Incom	e. Conveyour total aurent man	nthly in some from Official	Φ0.004.04					
	Form 122A-1 Line 11; <b>OR</b> , F		e: Copy your total current mor orm 122C-1 Line 14.	nuny income from Official	\$3,201.94					
9.	Copy the following specia	following special categories of claims from Part 4, line 6 of Schedule E/F:								
	From Part 4 on Schedule	E/F, copy the following:		Total claim						
				\$0.00						
	9a. Domestic support oblig	ations (Copy line 6a.)		<u> </u>						
	9b. Taxes and certain other	debts you owe the governr	ment. (Copy line 6b.)	\$7,000.00						
	9c. Claims for death or pers	sonal injury while you were i	ntoxicated. (Copy line 6c.)	\$0.00						
	9d. Student loans. (Copy lin	\$0.00								
	,	,		\$0.00						
	9e. Obligations arising out opriority claims. (Copy line 6)		r divorce that you did not repo	ort as $\frac{\psi 0.00}{}$						
				\$0.00						
	9f. Debts to pension or pro	fit-sharing plans, and other	similar debts. (Copy line 6h.)	<u>·</u>						

\$7,000.00

9g. Total. Add lines 9a through 9f.

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Fill in this	information	to identify your c	ase:						
Dobtor 1	Comu	ol.			Wod				
Debtor 1	Samu First N		Middle N	lame	Wade Last	Name			
Debtor 2 (Spouse, if fi	ling) First N	Jame	Middle N	lame	l ast	Name			
	1 11001	tcy Court for the:	Northern	airie	District of				
Case num	·	icy Court for the.	Northem			(State)			
(If known)						-			
Officia	al Form	106A/B							Check if this is an amended filing
Sche	dule A	B: Prope	erty						12/1
category v responsibl write your	where you the le for supply name and o	nink it fits best. I ing correct infor case number (if k	Be as complete a mation. If more s known). Answer e	nd ad pace very	ccurate as poss is needed, atta question.	e. If an asset fits in mo ible. If two married pec ch a separate sheet to Estate You Own or I	ople are this fo	e filing together, both a rm. On the top of any a	re equally
1. Do you	ı own or hav	e any legal or ed	quitable interest	in an	y residence, bui	lding, land, or similar ı	propert	y?	
<b>✓</b>	No. Go to P	art 2							
	Yes. Where	is the property?							
1.1	Street addre	ss, if available, or	other description	Wh	at is the proper Single-family ho	ty? Check all that apply. me		the amount of any secu	claims or exemptions. Put ired claims on <i>Schedule D:</i> hims Secured by Property.
	Olicet addre	33, II available, Ol	other description		Duplex or multi-	<del>-</del>		Current value of the	Current value of the
				Н	Condominium of Manufactured or	•		entire property?	portion you own?
				H	Land	mobile nome			<del></del>
	Number	Street		H	Investment prop	erty		Describe the nature of interest (such as fee s	
	City	State	Zip Code		Timeshare Other			the entireties, or a life	
	Oity	State	Zip oode		o has an interes	st in the property? Che	ck	Check if this is co	mmunity property
				one					
				H	Debtor 1 only Debtor 2 only				
				H	Debtor 1 and De	btor 2 only			
				Ħ	At least one of the	ne debtors and another			
						you wish to add about	this ite	m, such as local	
If vou	own or have	more than one, li	ist here:	pro	perty identifica	tion number.			
				Wh	at is the proper	ty? Check all that apply.		Do not deduct secured	claims or exemptions. Put
1.2	Street addre	ss, if available, or	other description	Ш	Single-family ho				red claims on Schedule D: nims Secured by Property.
					Duplex or multi-	· ·		Current value of the	Current value of the
					Condominium o	•		entire property?	portion you own?
				Н	Manufactured or Land	mobile nome			
	Number	Street		H	Investment prop	erty		Describe the nature of	
				H	Timeshare	·		interest (such as fee s the entireties, or a life	
	City	State	Zip Code		Other				
				Wh one		st in the property? Che	ck	Check if this is co (see instructions)	mmunity property
					Debtor 1 only			_	
					Debtor 2 only				
					Debtor 1 and De	btor 2 only			
					At least one of the	ne debtors and another			
					ner information perty identifica	you wish to add about tion number:	this ite	m, such as local	

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Debtor 1	Samuel First Name	Middle Name	Wade Last Name	Case numbe	r (if known)	
1.3 Stre	et address, if available, or o		What is the property? Check all that Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	t apply.	the amount of any secu	claims or exemptions. Put red claims on <i>Schedule D:</i> ims Secured by Property.  Current value of the portion you own?
Nur	nber Street State	Zip Code	Land Investment property Timeshare Other	<u> </u>	Describe the nature or interest (such as fee s the entireties, or a life	imple, tenancy by
		[ [ [	Who has an interest in the propert Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and according to the property identification number:	nother	(see instructions)	mmunity property
	the dollar value of the pove attached for Part 1. W	ortion you own for a rite that number h	all of your entries from Part 1, inc ere.	luding any entrie	s for pages	
Do you ov		equitable interes	t in any vehicles, whether they are	-	-	
•	ans, trucks, tractors, sport u	•	also report it on Schedule G: Execut cycles	ory Contracts and	Unexpired Leases.	
3.1	Make Model:	Mercedes- Benz S550	Who has an interest in the proone.  Debtor 1 only	operty? Check	the amount of any secu	claims or exemptions. Put ured claims on <i>Schedule D:</i> aims Secured by Property.
	Year: Approximate mileage: Other information:	2008 100000	Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors a		Current value of the entire property? \$15675.00	Current value of the portion you own? \$15675.00
3.2	Make Model: Year:		Who has an interest in the proone.  Debtor 1 only	operty? Check	the amount of any secu	claims or exemptions. Put ured claims on <i>Schedule D:</i> aims Secured by Property.
	Approximate mileage: Other information:		Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors a Check if this is community instructions)		Current value of the entire property?	Current value of the portion you own?

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btor 1	Samuel		Wade	Case numbe	er (if known)	
	First Name	Middle Name	Last Name			
3.3	Make Model: Year:		Who has an interest in the pone.  Debtor 1 only	property? Check	the amount of any secu	claims or exemptions. Pu red claims on <i>Schedule L</i> ims <i>Secured by Property</i> .
	Approximate mileage:		Debtor 2 only		Current value of the	Current value of the
	Other information:		Debtor 1 and Debtor 2 on	lv	entire property?	portion you own?
	Outer information.		At least one of the debtors	•		
			Check if this is commun			
			instructions)	, p. opo. 1, (eee		
3.4	Make		Who has an interest in the p	property? Check		claims or exemptions. Pu
	Model: Year:	<del></del>	one.			red claims on Schedule and ims Secured by Property
	Approximate mileage:		Debtor 1 only			
			Debtor 2 only		Current value of the entire property?	Current value of the portion you own?
	Other information:		Debtor 1 and Debtor 2 on	•	entire property:	————
			At least one of the debtors			
			Check if this is commun instructions)	nity property (see		
4.1	Yes Make		Who has an interest in the p	property? Check		claims or exemptions. Po
	Model: Year:		one.  Debtor 1 only			red claims on Schedule and secured by Property
	Approximate mileage:		Debtor 2 only			, , ,
	Other information:		Debtor 1 and Debtor 2 on	dv	Current value of the entire property?	Current value of the portion you own?
	Other information.		At least one of the debtors	•		
			Check if this is commun			
			instructions)	my proporty (see		
4.2	Make		Who has an interest in the p	property? Check		claims or exemptions. P
	Model:		one.			red claims on <i>Schedule</i> hims Secured by Property
	Year: Approximate mileage:		Debtor 1 only		Creditors Willo Have Cla	ums secured by Property
	Approximate mileage.		Debtor 2 only		Current value of the	Current value of the
	Other information:		Debtor 1 and Debtor 2 on	•	entire property?	portion you own?
			At least one of the debtors	s and another		
			Check if this is communinstructions)	nity property (see		
. Add	the dollar value of the port	tion you own for all	l of your entries from Part 2, in	ncluding any entrie	es for pages	5675.00
	we attached for Bort 2 Writ	ta that numbar hai	re		91	3013.00

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Wade Debtor 1 Samuel Case number (if known) Middle Name First Name Last Name Part 3: **Describe Your Personal and Household Items** Current value of the Do you own or have any legal or equitable interest in any of the following items? portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware Yes. Describe... Misc. Household Goods and Furniture \$990.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music Yes. Describe... iPhone, TV, stereo, other misc. consumer electronics \$375.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections, other collections, memorabilia, collectibles Yes. Describe... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No Yes. Describe... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment Yes. Describe... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Yes. Describe... **Used Clothing** \$340.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe... 13. Non-farm animals Examples: Dogs, cats, birds, horses Yes. Describe... 14. Any other personal and household items you did not already list, including any health aids you did not list No Yes. Describe... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$1705.00 for Part 3. Write that number here .....

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Wade Debtor 1 Samuel Case number (if known) Middle Name First Name Last Name Part 4: **Describe Your Financial Assets** Current value of the Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. 16. **Cash** Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition **✓** No Yes ..... Cash: ..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. Institution name: \$10.00 17.1. Checking account: JPM Chase 17.2. Checking account: 17.3. Savings account: 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts **✓** No Institution or issuer name: Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture % of ownership: Name of entity Yes. Give specific information about

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Part Name   Last American   Last American	Debt	or 1 Samuel		Wade	Case number (if known)	
Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders.  Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.  Yes. Give specific information about them    Issuer name:   Institution name:   Issuer name:   Issu		First Name	Middle Name	Last Name		
Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans    No		Negotiable instruments Non-negotiable instrume No No Yes. Give specific information about	include personal checks, cashiers ents are those you cannot transfe	checks, promissory not	es, and money orders.	
Yes. List each account:	21.			), thrift savings accounts	, or other pension or profit-sharing plans	
Yes. List each account account separately.   401(k) or similar plan:   401(k) via Nestle   Unknown		=	Type of account:	Institution name:		
Pension plan:    Rat:						Unknown
IRA: Retirement account: Keogh: Additional account: Additional account:  Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepald rent, public utilities (electric, gas, water), telecommunications companies, or others    No		separately.		101(11) 114110010		. <del></del>
Retirement account:  Keogh: Additional account: Additional account:  Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others  No Institution name:    Yes   Electric:   Gas:   Heating oil:   Security deposit on rental unit:   Prepaid rent:   Telephone:   Water:   Rented furniture:   Other:   Other:   No   Issuer name and description:			•			
Additional account: Additional account:  Additional account:  22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others  No Institution name:  Gas:  Heating oil:  Security deposit on rental unit:  Prepaid rent:  Telephone:  Water:  Rented furniture:  Other:  23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)						
Additional account:  22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others    No			Keogh:			
22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others  No Institution name:    Yes   Electric:   Gas:			Additional account:			
Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others  No Institution name:    Yes   Electric:			Additional account:			
Gas: Heating oil: Security deposit on rental unit: Prepaid rent: Telephone: Water: Rented furniture: Other:  23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)    No		Your share of all unused Examples: Agreements of companies, or others  No	d deposits you have made so that	c utilities (electric, gas, w		
Heating oil:  Security deposit on rental unit:  Prepaid rent:  Telephone:  Water:  Rented furniture:  Other:  23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)  Issuer name and description:		Yes	Electric:			
Security deposit on rental unit:  Prepaid rent:  Telephone:  Water:  Rented furniture:  Other:  23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)  Issuer name and description:			Gas:			
Prepaid rent:  Telephone:  Water:  Rented furniture:  Other:  23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)  Issuer name and description:			Heating oil:			
Telephone:  Water:  Rented furniture:  Other:  23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)  No  Issuer name and description:			Security deposit on rental unit:			
Water:  Rented furniture:  Other:  23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)  No  Issuer name and description:			•			
Rented furniture:  Other:  23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)  No  Issuer name and description:						. ———
Other:  23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)  No  Issuer name and description:						. ———
23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)  No  Issuer name and description:						
✓ No  Issuer name and description:						
	23.	<b>✓</b> No		o you, either for life or for	a number of years)	

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Debt	or 1 Samuel	Wade	Case number (if known)	
0.4	First Name	Middle Name Last Name	d	
24.		n education IRA, in an account in a qualified ABLE program, c 330(b)(1), 529A(b), and 529(b)(1).	r under a quailfied state tuition program.	
	No Yes	Institution name and description. Separately file the records of any	interests.11 U.S.C. § 521(c):	
0.5	Tweete equito		in line 4) and vishts as names	
25.		ble or future interests in property (other than anything listed or your benefit	in line 1), and rights or powers	
	✓ No  Yes. Descri	ribe		
26.		rrights, trademarks, trade secrets, and other intellectual prop met domain names, websites, proceeds from royalties and licensin		
	✓ No  Yes. Descri	ibe		
27.		nchises, and other general intangibles ding permits, exclusive licenses, cooperative association holdings,	iquor licenses, professional licenses	
	<b>✓</b> No			
	Yes. Descri	ibe		
	-			
Mor	ney or proper	ty owed to you?		Current value of the portion you own?  Do not deduct secured claims or exemptions.
	ney or proper			portion you own? Do not deduct secured
				portion you own?  Do not deduct secured claims or exemptions.
	Tax refunds ov  No Yes. Give s	ved to you pecific information	Federal:	portion you own? Do not deduct secured
	Tax refunds ow  No Yes. Give s about you a	pecific information t them, including whether lready filed the returns	Federal: State:	portion you own?  Do not deduct secured claims or exemptions.
28.	Tax refunds ov  No Yes. Give s about you a and th	pecific information t them, including whether lready filed the returns ne tax years		portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds ov  No Yes. Give s about you a and th	pecific information t them, including whether lready filed the returns ne tax years	State: Local:	portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00
28.	Tax refunds ov  No Yes. Give s about you a and th  Family support Examples: Past	pecific information t them, including whether lready filed the returns ne tax years  t due or lump sum alimony, spousal support, child support, mainter	State: Local:	portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00
28.	Tax refunds ov  No Yes. Give s about you a and th  Family support Examples: Past	pecific information t them, including whether lready filed the returns ne tax years	State:  Local:  nance, divorce settlement, property settlemen	portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00
28.	Tax refunds ov  No Yes. Give s about you a and th  Family support Examples: Past	pecific information t them, including whether lready filed the returns ne tax years  t due or lump sum alimony, spousal support, child support, mainter	State:  Local:  nance, divorce settlement, property settlemen  Alimony:	portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00  t  \$0.00
28.	Tax refunds ov  No Yes. Give s about you a and th  Family support Examples: Past	pecific information t them, including whether lready filed the returns ne tax years  t due or lump sum alimony, spousal support, child support, mainter	State:  Local:  nance, divorce settlement, property settlemen  Alimony:  Maintenance:	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00  \$0.00  t  \$0.00
28.	Tax refunds ov  No Yes. Give s about you a and th  Family support Examples: Past	pecific information t them, including whether lready filed the returns ne tax years  t due or lump sum alimony, spousal support, child support, mainter	State: Local:  Alimony: Maintenance: Support:	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00  \$0.00  t  \$0.00 \$0.00
28.	Tax refunds ov  No Yes. Give s about you a and ti  Family support Examples: Past  No Yes. Give s  Other amounts Examples: Unpa	pecific information t them, including whether lready filed the returns ne tax years  t due or lump sum alimony, spousal support, child support, mainter	State: Local:  Alimony: Maintenance: Support: Divorce settlement: Property settlement:	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00  t  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
28.	Tax refunds ov  No Yes. Give s about you a and ti  Family support Examples: Past  No Yes. Give s  Other amounts Examples: Unpa	pecific information them, including whether lready filed the returns ne tax years  t due or lump sum alimony, spousal support, child support, mainter pecific information	State: Local:  Alimony: Maintenance: Support: Divorce settlement: Property settlement:	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00  t  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
28.	Tax refunds ov  No Yes. Give s about you a and th  Family support Examples: Past  No Yes. Give s  Other amount: Examples: Unpa	pecific information It them, including whether Ilready filed the returns The tax years	State: Local:  Alimony: Maintenance: Support: Divorce settlement: Property settlement:	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00  t  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00

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Deb	tor 1 Samuel		Wade	Case number (if known)	
	First Name	Middle Name	Last Name		
31.	Interests in insurance policies Examples: Health, disability, or life in	surance; health savir	ngs account (HSA); credit,	homeowner's, or renter's insurance	
	Yes. Name the insurance compared of each policy and list its value	iny	any name:	Beneficiary:	Surrender or refund value:
32.	Any interest in property that is du If you are the beneficiary of a living to property because someone has died	ust, expect proceed		cy, or are currently entitled to receive	
	✓ No Yes. Describe				
33.	Claims against third parties, when Examples: Accidents, employment d	-		e a demand for payment	
	✓ No  Yes. Describe				
34.	Other contingent and unliquidate to set off claims	d claims of every n	ature, including counte	rclaims of the debtor and rights	
	✓ No Yes. Describe				
35.	Any financial assets you did not a	Iready list			
	Yes. Describe				
36.	Add the dollar value of all of your for Part 4. Write that number here				\$10.00
	- I. A. B B		<b>.</b>		
Part				Interest In. List any real estate in Part 1	
37.	Do you own or have any legal or e	quitable interest in	n any business-related p		
	No. Go to Part 6. Yes. Go to line 38.			<b>po</b> Do	rrent value of the rtion you own? not deduct secured claims exemptions
38.	Accounts receivable or commissi	ons you already ea	rned	Ci	SAGITIPHOTIS
	✓ No  Yes. Describe				
39.	Office equipment, furnishings, and Examples: Business-related computer		ns, printers, copiers, fax m	nachines, rugs, telephones, desks, chairs, electro	nic devices
	No Yes. Describe				

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Deb	tor 1 Samuel	Wade Case number (i	f known)
1.0	First Name	Middle Name Last Name	
40.	macninery, fixtures, eq	uipment, supplies you use in business, and tools of your trade	
	<b>✓</b> No		
	Yes. Describe		
	_		
44	Inventor:		
41.	Inventory		
	<b>✓</b> No		
	Yes. Describe		
12	Interests in partnership	ne or inint ventures	
72.		ps of joint ventures	
	<b>✓</b> No	Name of entity: % o	f ownership:
	Yes. Give specific	, and the state of straight	
	information about them		
12	Customor lists mailing l	lists, or other compilations	<del></del>
45.		ists, or other compliations	
	✓ No		
	Yes. Do your lists in	clude personally identifiable information (as defined in 11 U.S.C. § 101(41A))?	
	☐ No		
	Yes. Descri	he	
	100. 2000		
44.	Any business-related p	property you did not already list	
	<b>√</b> No		
	Yes. Give specific		
	information		
			<del></del>
		·	
		I of your entries from Part 5, including any entries for pages you have attacher there	∍d
<b>•</b>	art o. write that humber		
Part	6: Describe Any Fa	rm- and Commercial Fishing-Related Property You Own or Have a	n Interest In.
	If you own or have an i	interest in farmland, list it in Part 1.	
46.	Do you own or have an	y legal or equitable interest in any farm- or commercial fishing-related prope	erty?
	No. Go to Part 7.		Current value of the
	Yes. Go to line 47.		portion you own?  Do not deduct secured claims
	100. 00 10 1110 17.		or exemptions
47.	Farm animals		
	Examples: Livestock, po	ultry, farm-raised fish	
	<b>√</b> No		
	Yes. Describe		

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Deb <sup>-</sup>		Nade	Case number (if known)	
	First Name Middle Name I	ast Name		
48.	Crops-either growing or harvested			
	<b>☑</b> No			
	<u> </u>			
	Yes. Describe			
10	Farm and fishing equipment, implements, machinery, fixture	es and tools of trade		
43.	raini and usining equipment, implements, machinery, include	es, and tools of trade		
	<b>✓</b> No			
	Yes. Describe			
50.	Farm and fishing supplies, chemicals, and feed			
	<b>✓</b> No			
	Yes. Describe			
51.	Any farm- and commercial fishing-related property you did	not already list		
	No No			
	<u> </u>			
	Yes. Describe			
	dd the dollar value of all of your entries from Part 6, includin		=	
for Pa	art 6. Write that number here			
			_	
	_			
Part	7: Describe All Property You Own or Have an Interes	est in That You Did N	lot List Above	
53.	Do you have other property of any kind you did not already I	ist?		
	Examples: Season tickets, country club membership			
	✓ No			
	Yes. Give specific			
	information			
54. A	dd the dollar value of all of your entries from Part 7. Write th	at number here		<u> </u>
Part	8: List the Totals of Each Part of this Form			
55. I	Part 1: Total real estate, line 2			<del></del>
56.	part 2 total vehicles, line 5	\$15675.00		
57. <b>F</b>	Part 3: Total personal and household items, line 15	ф1705 00	•	
		\$1705.00		
58. <b>F</b>	Part 4: Total financial assets, line 36	\$10.00		
59. I	Part 5: Total business-related property, line 45			
60. I	Part 6: Total farm- and fishing-related property, line 52			
		-		
б1. I	Part 7: Total other property not listed, line 54		<u>.                                    </u>	
62.	Total personal property. Add lines 56 through 61	\$17390.00		+ \$17390.00
		ψ17000.00	Copy personal property total	
				\$17390.00
∣ 63. <b>T</b>	Total of all property on Schedule A/B. Add line 55 + line 62			

		Case 17-26234		08/31/17 Iment	Entered 08/31/17 Page 20 of 67	13:06:37	Desc Main
Fill	in this inforr	nation to identify your case:					
Deb	otor 1	Samuel		Wade			
		First Name	Middle Name	Last Nan	ne		
	otor 2 ouse, if filing)	First Name	Middle Name	Last Nan	20		
Uni	ted States B	ankruptcy Court for the: Nort	nern L	District of Illine (Sta			
	se number						
(II KI	OWII)						Check if this is an
Of	ficial I	Form 106C					amended filing
			v	_			
		e C: The Property e and accurate as possible			•		04/16
as e add For stat	exempt. If r itional pag each iten se a specif	nore space is needed, fill of les, write your name and co n of property you claim as ic dollar amount as exen	ut and attach to this ase number (if known s exempt, you must : apt. Alternatively, yo	page as man). specify the u may clair	amount of the exemption the full fair market value.	on you claim. Cue of the prop	the property that you claim necessary. On the top of any one way of doing so is to erty being exempted up to eive certain benefits, and
tax-	exempt re	etirement funds—may be	unlimited in dollar	amount. Ho	wever, if you claim an e	xemption of 10	00% of fair market value
		•	•		nd the value of the prope	erty is determi	ned to exceed that amount,
you	r exempti	on would be limited to the	e applicable statutor	ry amount.			
Par	t 1: Iden	tify the Property You Clai	m as Exempt				
1.		of exemptions are you claim		ven if your sp	ouse is filing with you.		
	<b>✓</b> You a	re claiming state and federal	nonbankruptcy exemp	otions. 11 U.	S.C. § 522(b)(3)		
	You a	re claiming federal exemptio	ns. 11 U.S.C. § 522(b)(	(2)			
2.	For any pi	operty you list on Schedule	A/B that you claim as e	exempt, fill in	the information below.		
		ription of the property and	Current value of	Amount of	the exemption you claim	Specifi	c laws that allow exemption
	line on Sc property	hedule A/B that lists this	the portion you own	Check only	one box for each exemption.		
			Copy the value from				

Schedule A/B

\$15,675.00

\$10.00

(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

 $\overline{\mathbf{V}}$ 

**✓** 

\$0

\$10.00

100% of fair market value, up to any

100% of fair market value, up to any

applicable statutory limit

applicable statutory limit

☐ No ☐ Yes

Brief

description:

Line from Schedule A/B:

description:

Line from Schedule A/B:

Chase

Brief

2008

Mercedes-Benz S550,

Checking account, JPM

Are you claiming a homestead exemption of more than \$160,375?

735 ILCS 5/12-1001(c); 735 ILCS

5/12-1001(b)

735 ILCS 5/12-1001(b)

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Debtor 1 Samuel Wade Case number (if known) Middle Name First Name Last Name Part 2: **Additional Page** Brief description of the property and **Current value of** Amount of the exemption you claim Specific laws that allow exemption line on Schedule A/B that lists this the portion you Check only one box for each exemption. property own Copy the value from Schedule A/B Brief 735 ILCS 5/12-1001(b) \$990.00 description: **✓** \$990.00 Misc. Household Goods 100% of fair market value, up to any and Furniture applicable statutory limit Line from Schedule A/B: 06 735 ILCS 5/12-1001(a) Brief \$340.00 description: **✓** \$340.00 **Used Clothing** 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 11 735 ILCS 5/12-1006 Brief Unknown description: \$0 401(k) or similar plan, 100% of fair market value, up to any 401(K) via Nestle applicable statutory limit Line from Schedule A/B: 21 Brief 735 ILCS 5/12-1001(b) \$375.00 description: \$375.00 iPhone, TV, stereo, other 100% of fair market value, up to any misc. consumer applicable statutory limit electronics

Line from Schedule A/B:

07

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		DC	icument Page 22 or	07		
Fill in this info	ormation to identify your ca	se:				
Debtor 1	Samuel		Wade			
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name			
United States	Bankruptcy Court for the:	Northern	District of Illinois (State)			
Case number	r		(State)			
Official	Form 106D			J		Check if this is an amended filing
Sched	ule D: Credite	ors Who Ha	ve Claims Secure	ed by Prop	ertv	12/15
more space i	s needed, copy the Additions se number (if known).	onal Page, fill it out, nur	e are filing together, both are equinber the entries, and attach it to t	•		
-	creditors have claims se					
			with your other schedules. You have	e nothing else to repo	ort on this form.	
✓ Yes	s. Fill in all of the information	n below.				
Part 1: Lis	t All Secured Claims					
separa	<del>-</del>	nan one creditor has a par	sured claim, list the creditor ticular claim, list the other creditors order according to the creditor's	Column A  Amount of claim  Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
	nder Consumer USA	Describe the property	that secures the claim:	\$21,667.00	\$15,675.00	\$5,992.00
	r's Name 1 MYFORD RD FL 2	063 Automobile				
	nber Street	As of the date you file	, the claim is: Check all that apply.			
		Contingent				
TUSTI		Unliquidated				
City Who o	State ZIP Code wes the debt? Check one.	Disputed				
	ebtor 1 only	Nature of lien. Check	all that apply.			
	ebtor 2 only ebtor 1 and Debtor 2 only	An agreement you car loan)	made (such as mortgage or secured			
	least one of the debtors	Statutory lien (such	as tax lien, mechanic's lien)			
	nd another	Judgment lien from	n a lawsuit			
	heck if this claim relates	Other (including a r	ight to offset)			
	o a community debt debt was <u>3/2016</u> red	Last 4 digits of accou	nt number1000			

Add the dollar value of your entries in Column A on this page. Write that number

here:

\$21,667.00

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		Document Page 23 of 67			
Fill in this info	rmation to identify your case:				
Debtor 1	Samuel	Wade			
Dahta : 0	First Name Middle Na	me Last Name			
Debtor 2 (Spouse, if filing)	First Name Middle Na	me Last Name			
United States	Bankruptcy Court for the: Northern	District of Illinois(State)			
Case number		(Grate)			
	Form 106E/F		Chec	k if this is an	amended filing
		ha Haya Unaaqurad Claima	. –		
<u>Scnea</u>	ule E/F: Creditors w	ho Have Unsecured Claims	5		12/15
claims that ar the entries in known).	e listed in Schedule D: Creditors Who Hold	and Unexpired Leases (Official Form 106G). Do not include Claims Secured by Property. If more space is needed, coption Page to this page. On the top of any additional pages,	y the Part you	u need, fill it	out, number
No. Yes  List all c	of your priority unsecured claims. If a credit	painst you?  or has more than one priority unsecured claim, list the creditor so the priority and nonpriority amounts, list that claim here and show			
As much Continua	as possible, list the claims in alphabetical ord ation Page of Part 1. If more than one creditor	er according to the creditor's name. If you have more than two pholds a particular claim, list the other creditors in Part 3.			
(i oi aii o	Application of odor type of staint, occ the mod		Total claim	Priority amount	Nonpriority amount
2.1 IRS 1		— Last 4 digits of account number	\$7,000.00	\$7,000.00	\$0.00
Priority PO Box	Creditor's Name < 7346	When was the debt incurred? n/a			
Numbe	er Street	As of the date you file, the claim is: Check all that apply.			
Philade City	lphia Pennsylvania 19101 State Zip Code	Contingent Unliquidated			
Who in	curred the debt? Check one. btor 1 only	Disputed			
	btor 2 only	Type of PRIORITY unsecured claim:			
De	btor 1 and Debtor 2 only	Domestic support obligations			
At	least one of the debtors and another	✓ Taxes and certain other debts you owe the government			
Ch	eck if this claim relates to a community d	Claims for death or personal injury while you were intoxicated			
Is the d	claim subject to offset?	Other Specify			

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Debtor 1 Samuel Wade Case number (if known) Middle Name First Name Last Name Part 2: List All of Your NONPRIORITY Unsecured Claims Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. **✓** Yes. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than four priority unsecured claims fill out the Continuation Page of Part 2. **Total claim** 4.1 Americash - Bankruptcy \$1.00 Last 4 digits of account number Nonpriority Creditor's Name Mkt Square Shop Ctr 180 S Bolingbrook Dr When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60440 Illinois Bolingbrook City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: V Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify \_\_\_ Notice Only Is the claim subject to offset? Yes 4.2 Berwyn Parking Tickets \$1.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? n/a 6401 31st Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Illinois 60402 Berwyn Zip Code Disputed City State Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify Tickets - Notice Is the claim subject to offset? **✓** No Yes 4.3 Cash City Loans \$1.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 7756 Madison St Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60305 River Forest Illinois City Zip Code Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only **✓** Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another debts Check if this claim relates to a community debt Other. Specify \_ Notice Only Is the claim subject to offset? **✓** No Offician Yes Schedule E/F: Creditors Who Have Unsecured Claims page 2

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Wade Debtor 1 Samuel Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.4 City of Chicago Department of Revenue \$10,000.00 Last 4 digits of account number

	Nonpriority Creditor's Name	Last 4 digits of account number
	121 North LaSalle Street	When was the debt incurred?n/a
	Number Street	
		As of the date you file, the claim is: Check all that apply.
		— Contingent
	Oldered and Older	Unliquidated
	Chicago Illinois 60602 City State Zip Code	
	·	Disputed
	Who incurred the debt? Check one.  Debtor 1 only	Type of NONPRIORITY unsecured claim:
	<u> </u>	Student loans
	Debtor 2 only	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims
	At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar
	Check if this claim relates to a community debt	debts
		✓ Other. Specify
	Is the claim subject to offset?	
	✓ No	
	Yes	
	<u> </u>	
4.5	Credit Box	— Last 4 digits of account number\$1.00
	Nonpriority Creditor's Name	
	P.O. Box 168 Number Street	When was the debt incurred?n/a
	Number Street	As of the date you file, the claim is: Check all that apply.
		— Contingent
	Des Plaines Illinois 60016	Unliquidated
	City State Zip Code	Disputed
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:
	Debtor 1 only	<u>··</u>
	Debtor 2 only	Student loans
	<u> </u>	Obligations arising out of a separation agreement or
	Debtor 1 and Debtor 2 only	divorce that you did not report as priority claims
	At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar
	Check if this claim relates to a community debt	debts
	_	Other. Specify Notice Only
	Is the claim subject to offset?	
	✓ No	
	Yes	
4.6	IL Tollway	— Last 4 digits of account number\$1.00
	Nonpriority Creditor's Name 2700 Ogden Ave	When was the debt incurred?
	Number Street	When was the dest mounted:
	Trained Stroot	As of the date you file, the claim is: Check all that apply.
		— Contingent
	Downers Grove Illinois 60515	Unliquidated
	City State Zip Code	Disputed
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:
	Debtor 1 only	
	Debtor 2 only	Student loans
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims
	At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar
	Check if this claim relates to a community debt	debts  Other. Specify  Tickets
	Is the claim subject to offset?	✓ Other. Specify
	✓ No	
	Yes	

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 Debtor 1 First Name
 Samuel First Name
 Wade Last Name
 Case number (if known)

	After listing and author on this ways according to the or beginning	a with 4.5 fallowed by 4.0 and as fauth	Takal alakus
	After listing any entries on this page, number them beginning	g with 4.5, followed by 4.6, and so forth.	Total claim
.7	L J ROSS ASSOCIATES IN Nonpriority Creditor's Name	Last 4 digits of account number 7553	\$580.00
	4 UNIVERSAL WAY	When was the debt incurred? 7/2017	
	Number Street	As of the date you file, the claim is: Check all that apply.	
		Contingent	
	JACKSON Michigan 49202	Unliquidated	
	City State Zip Code		
	Who incurred the debt? Check one.  Debtor 1 only	Disputed	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	<u></u>	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or	
	At least one of the debtors and another	divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar	
	Check if this claim relates to a community debt	debts	
	Is the claim subject to offset?	001 Collection; Collecting for	
	✓ No	Other. Specify ORIGINAL CREDITOR: COMED	
	Yes		
.8	Village of Forest Park		\$1.00
.0	Nonpriority Creditor's Name	Last 4 digits of account number	Ψ1.00
	517 Desplaines Ave Number Street	When was the debt incurred?n/a	
	Number Street	As of the date you file, the claim is: Check all that apply.	
		Contingent	
	Forest Park Illinois 60130	Unliquidated	
	City State Zip Code	Disputed	
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
	Debtor 1 only	Student loans	
	Debtor 2 only	불	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar	
	Check if this claim relates to a community debt	debts  Citizen Constitution Title to Matter	
	Is the claim subject to offset?	Other. Specify Tickets - Notice	
	No		
	Yes		
.9	Village of Oak Park C/O MSB Parking Nonpriority Creditor's Name	Last 4 digits of account number	\$1.00
	P.O. Box 10479	When was the debt incurred? n/a	
	Number Street	As of the date you file, the claim is: Check all that apply.	
		— Contingent	
	Newport Beach California 92658	Unliquidated	
	City State Zip Code Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or	
	<u></u>	divorce that you did not report as priority claims	
	At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
	Check if this claim relates to a community debt	Other. Specify Tickets - Notice	
	Is the claim subject to offset?	_	
	✓ No		

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Debto	r 1 Samuel First Name		Middle Name	Wade Last Name	Case no	umber (if known)
Part 3	List Others to	Be Notified A	bout a Debt That	You Already Liste	ed	
5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For examp collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the addition creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.						
	rnold Scott Harris			On which ent	ry in Part 1 or Part	2 did you list the original creditor?
<u>1</u>	111 W. Jackson # 600 Number Street		Line 4.4	Line 4.4 of (Check	Part 1: Creditors with Priority Unsecured Claims	
N _				one):	Part 2: Creditors with Nonpriority Unsecured Claims	
C	hicago	Illinois	60604	Last 4 digits of	of account number	
C	City	State	Zip Code			<del></del>

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Debtor 1 Samuel Wade Case number (if known)

First Nar	me Middle Name Last Name		
Part 4: Add th	ne Amounts for Each Type of Unsecured Claim		
	nmounts of certain types of unsecured claims. This information is nounts for each type of unsecured claim.	s for s	tatistical reporting purposes o
			Total claims
Total claims from Part 1	6a. Domestic support obligations.	6a.	\$0.00
	6b. Taxes and certain other debts you owe the government	6b.	\$7,000.00
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$0.00
	6d. Other. Add all other priority unsecured claims. Write that	6d.	\$0.00
	amount here.  6e. Total. Add lines 6a through 6d.	6e.	\$7,000.00
			Total claims
Total claims from Part 2	6f. Student loans	6f.	\$0.00
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.00
	6i. Other. Add all other nonpriority unsecured claims. Write	6i.	\$10,587.00
	that amount here.	0	
	6j. Total. Add lines 6f through 6i.	6j.	\$10,587.00

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Fill in this infor	mation to identify your c	ase:		
Debtor 1	Samuel		Wade	
	First Name	Middle Name	Last Name	,
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States E	Sankruptcy Court for the:	Northern	District of Illinois	
			(State)	
Case number				
(If known)				

#### Official Form 106G

### Check if this is an amended filing

### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
- Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

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		D0	cument Paye	2 30 01 07
Fill in this info	rmation to identify your ca	ase:		
Debtor 1	Samuel		Wade	
Debtor 2	First Name	Middle Name	Last Name	
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States	Bankruptcy Court for the:	Northern	District of Illinois	
Case number			(State)	
(If known)				Check if this is an
				amended filing
Official	Form 106H			
Schedu	le H: Your Cod	lehtors		12/15
1. Do you h  No Yes	er every question.  ave any codebtors? (If you	u are filing a joint case, do	not list either spouse as	
Idaho, Lo	puisiana, Nevada, New Mex			(Community property states and territories include Arizona, California, n.)
	. Go to line 3. s. Did your spouse, forme	r spouse, or legal equiva	lent live with you at the	rime?
	No	r opodoo, or logal oquiva	one ave war you at alle	
	Yes. In which community	y state or territory did you	ı live?	Fill in the name and current address of that person.
	Name of your spouse, for	ormer spouse, or legal equi	valent	
	Number Street			
	City	State	Zip Co	de
3. In Colum	ın 1, list all of your codeb	tors. Do not include you	spouse as a codebtor	if your spouse is filing with you. List the person shown in line 2

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line a again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G to fill out Column 2.

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

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Fill in this informs						
	ation to identify	your case:				
Debtor 1 Sam			Wade			
	t Name	Middle Name	Last Na	ame	Che	ck if this is:
Debtor 2 (Spouse, if filing) First	t Name	Middle Name	Last Na	ame	·   🗖	An amended filing
				-		A supplement showing post-petition chapter
United States Bank the:	ruptcy Court for	Northern	District of Illin	nois tate)		expenses as of the following date:
Case number			(3)	ial <del>e</del> )		
(If known)						MM / DD / YYYY
Official For	rm 106I					
Schedule I	: Your In	come				12 <i>/</i> ·
information about spouse. If more sp number (if known	t your spouse. I pace is needed	f you are separated and , attach a separate shed y question.	l your spous	e is not filing v	vith you, do	r spouse is living with you, include not include information about your ional pages, write your name and case
Fill in your emp	oloyment		Debtor 1			Debtor 2
information.						
If you have more	e than one job,	Employment status	<b>✓</b> Employ			Employed
attach a separate page with information about additional			Not Em	nployed		Not Employed
employers.	at additional	Occupation				
Include part time self-employed w		Employer's name	Nestle			
Occupation may	y include student	Employer's address	800 N Brar			
or homemaker, i			Number Stre	eet		Number Street
			Olevedele	Oal!faire!	01000	
			Glendale	California	91203	<u> </u>
			City	State	Zip Code	City State Zip Code
		How long employed	City	State	Zip Code	City State Zip Code
		How long employed there?	City	State 	Zip Code	City State Zip Code
Part 2: Give De	etails About N		City	State	Zip Code	City State Zip Code
		there?				
	ly income as of t	there?				City State Zip Code  write \$0 in the space. Include your non-filing
Estimate monthly spouse unless you	ly income as of to u are separated. -filing spouse have	flonthly Income the date you file this form more than one employer,	ı. If you have	nothing to repor	for any line, v	
Estimate monthly spouse unless you If you or your non-	ly income as of to u are separated. -filing spouse have	flonthly Income the date you file this form more than one employer,	ı. If you have	nothing to repor	for any line, v	write \$0 in the space. Include your non-filing or that person on the lines below. If you need
Estimate monthly spouse unless you If you or your nonmore space, attact	ly income as of to a re separated.  -filing spouse have the a separate sheet gross wages, sala	flonthly Income the date you file this form more than one employer,	n. If you have to combine the it	nothing to repor	for any line, v I employers fo	write \$0 in the space. Include your non-filing or that person on the lines below. If you need
Estimate monthly spouse unless you If you or your non-more space, attact.  2. List monthly deductions.) If be.	ly income as of to a re separated.  -filing spouse have the a separate sheet gross wages, sala	there?  Monthly Income  the date you file this form  e more than one employer, et to this form.  ary, and commissions (befor	n. If you have to combine the it	nothing to repor nformation for a For De	for any line, v I employers fo	write \$0 in the space. Include your non-filing or that person on the lines below. If you need

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Debt	· · · ·	Wade	Case number	(if	
	First Name Middle Name I	Last Name	known) For Debtor 1	For Debtor 2 or non-filing spouse	
Co	py line 4 here	<b>→</b> 4	\$3,201.94	non-ming spouse	
	st all payroll deductions:				
	a. Tax, Medicare, and Social Security deductions	5a.	\$530.88		
	. Mandatory contributions for retirement plans	5b.	\$0.00		
	. Voluntary contributions for retirement plans	5c.	\$128.09		
	l. Required repayments of retirement fund loans	5d.	\$0.00		
	a. Insurance	5e.	\$125.49		
	Domestic support obligations	5f.	\$0.00		
	. Union dues	5g.	\$0.00		
	a. Other deductions. Specify:		\$0.00 +		
	d the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5	-	\$784.46		
7. <b>Ca</b>	Iculate total monthly take-home pay. Subtract line 6 from line	4. 7.	\$2,417.48		
8. <b>Lis</b>	st all other income regularly received:				
8a	Net income from rental property and from operating a business, profession, or farm				
	Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$0.00		
8b	o. Interest and dividends	8b.	\$0.00		
80	E. Family support payments that you, a non-filing spouse, or dependent regularly receive	а			
	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$0.00		
80	d. Unemployment compensation	8d.	\$0.00		
8e	e. Social Security	8e.	\$0.00		
8f	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies Specify:		<b>\$0.00</b>		
0.0	Pension or retirement income	8f.	\$0.00 \$0.00		
		8g. 8h. +	\$0.00 \$0.00 +		
	n. Other monthly income. Specify:				
9. Au	<b>d all other income</b> Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g +	- OII. 9. <u>-</u>	\$0.00		
	alculate monthly income. Add line 7 + line 9. Id the entries in line 10 for Debtor 1 and Debtor 2 or non-filing sp	10. Douse	\$2,417.48 +	=	\$2,417.48
In frie	tate all other regular contributions to the expenses that you clude contributions from an unmarried partner, members of your ends or relatives.  To not include any amounts already included in lines 2-10 or amounts.	household, your d	ependents, your roomm		
	pecify:	and that are not av	anabic to pay expenses	11	+ \$0.00
—	roony.				
	dd the amount in the last column of line 10 to the amount in rite that amount on the Summary of Schedules and Statistical Su				\$2,417.48
					Combined monthly income
13. <b>D</b>	o you expect an increase or decrease within the year after your No.	you file this form?			
L	Yes. Explain:				

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		Docu	ment Page 33 of 67	,	
Fill in this infor	mation to identif	y your case:			
Debtor 1	Samuel		Wade		
Dobtor 0	First Name	Middle Name	Last Name	Check if this is:	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	An amended fili	ng
United States E	Bankruptcy Court	for the: Northern [	District of Illinois (State)		howing post-petition chapter 13 the following date:
Case number (If known)				MM / DD / YYY	<del></del>
Official	Form 10	6J			
Schedul	e J: Your	Expenses			12/15
information. If		as possible. If two married people and eeded, attach another sheet to this ion.			
Part 1: Des	cribe Your Ho	usehold			
1. Is this a joi	nt case?				
✓ No. Go	to line 2				
Yes. Do	oes Debtor 2 live	e in a separate household?			
	No				
	Yes. Debtor 2	must file Official Forms 106J-2, Expen	ses for Separate Household of Debt	or 2.	
2. Do you hav	e dependents?	No			
Do not list D Debtor 2.	ebtor 1 and	Yes. Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2 Child	Dependent's age	Does dependent live with you?  No.  Yes.
	penses include	■ No			<u>V</u>
expenses of than	f people other	No			
yourself and dependents	-	Yes			
Part 2: Estin	mate Your On	going Monthly Expenses			
	of a date after th	your bankruptcy filing date unless y le bankruptcy is filed. If this is a sup			
	•	h non-cash government assistance luded it on Sc <i>hedule I: Your Incom</i> e	-		Your expenses
	or home owner or the ground or l	rship expenses for your residence. In ot. 4.	clude first mortgage payments and		<b>\$800.00</b>
If not incl	uded in line 4:				
4a. Real es	state taxes				4a <b>\$0.00</b>

\$0.00

\$0.00

\$0.00

4b.

4c.

4d.

4b. Property, homeowner's, or renter's insurance

4c. Home maintenance, repair, and upkeep expenses

4d. Homeowner's association or condominium dues

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 Debtor 1 First Name
 Samuel First Name
 Wade Last Name
 Case number (if known)

5. Additional mortgage payments for your residence, such as home equily loans         5.         \$0.00           6. Utilities:         5.         \$0.00           6b. Water, sewer, garbage collection         6b.         \$0.00           6c. Tallephone, call phone, Internet, satellite, and cable services         6c.         \$190.00           6d. Other, Speatity:         6d         \$0.00           7. Food and housekeeping supplies         7.         \$275.00           8. Childrage and children's education costs         8.         \$20.00           10. Personal care products and services         10.         \$10.00           11. Medical and dental expenses         11.         \$5.00           12. Transportation, Include gar gam, maintranace, bus or frain fare.         12.         \$135.00           Do not include car payments         13.         \$0.00           14. Charitable contributions and religious donations         14.         \$0.00           15. Internamen.         15.         \$0.00           15. It leas insurance         15a         \$0.00           15. White insurance         15a         \$0.00           15. Water insurance. Specify:         15d         \$0.00           16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.         \$0.00	riist ivanie ivi	dule Name Last Name		
Sea				Your expenses
6a. Electricity, heat, natural gas         6a.         \$160.00           6b. Water, sewer, garbage collection         6b.         \$0.00           6c. Telephone, cell phone, Internet, satellite, and cable services         6c.         \$160.00           6d. Other. Specify:         6d.         \$0.00           7. Food and housekeeping supplies         7.         \$275.00           8. Childcare and children's education costs         8.         \$0.00           9. Ciothing, laundry, and dry cleaning         9.         \$25.00           10. Personal care products and services         11.         \$5.00           11. Medical and dental expenses         11.         \$5.00           11. Medical and dental expenses         11.         \$5.00           12. Transportation. Include gas, maintenance, bus or train fare.         12.         \$15.00           Do not include car payments         13.         \$0.00           14. Charitable contributions and religious donations         14.         \$0.00           15. Install insurance         15.         \$0.00           15b. Health insurance         15.         \$0.00           15c. Vahicle Insurance         15.         \$0.00           15c. Vahicle Insurance.         15.         \$0.00           15c. Vahicle Insurance.	5. Additional mortgage payments for you	r residence, such as home equity loans	5.	\$0.00
6b. Water, sewer, garbage collection         6b.         \$0.00           6c. Telephone, cell phone, Internet, satellite, and cable services         6c.         \$150.00           6d. Other, Specify:         7.         \$275.00           7. Food and housekceping supplies         7.         \$275.00           8. Childcare and children's education costs         8.         \$0.00           9. Clothing, laundry, and dry cleaning         9.         \$20.00           10. Personal care products and services         11.         \$5.00           11. Medical and dental expenses         11.         \$5.00           12. Transportation. Include gas, maintenance, bus or train fare.         12.         \$135.00           13. Entertainment, clubs, recreation, newspapers, magazines, and books         13.         \$0.00           14. Charitable contributions and religious donations         14.         \$0.00           15. Insurance.         15.         \$0.00           15a. Life insurance deducted from your pay or included in lines 4 or 20.         15a.         \$0.00           15c. Vehicle insurance         15b.         \$0.00           15c. Vehicle insurance         15c.         \$0.00           15c. Vehicle insurance         15c.         \$0.00           15c. Taxes. Do not include taxes deducted from your pay or included in line	6. Utilities:			
6c. Telephone, cell phone, Internet, satellite, and cable services 6d. S150.00 6d. Other. Specify: 6d. S150.00 6d. Other. Specify: 7. Food and housekeeping supplies 8. S0.00 7. Food and housekeeping supplies 8. S. Childcare and children's education costs 8. S. Childcare and children's education costs 9. Clothing, laundry, and dry cleaning 9. \$20.00 9. Clothing, laundry, and dry cleaning 9. \$20.00 10. Personal care products and services 11. S5.00 11. Medical and dental expenses 12. S135.00 11. Medical and dental expenses 12. Transportation. Include gas, maintenance, bus or train fare. Do not include care payments 13. Entertainment, clubs, recreation, newspapers, magazines, and books 14. Charitable contributions and religious donations 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. S0.00 15c. Vehiclei insurance 15c. Vehicle insurance 15c. Vehiclei insurance, specify: 15c. Vehiclei insurance 15c. Vehiclei ins	6a. Electricity, heat, natural gas		6a.	\$160.00
6d. Other Specify:	6b. Water, sewer, garbage collection		6b.	\$0.00
7. Food and housekeeping supplies       7.       \$275.00         8. Childcare and childcare's education costs       8.       \$0.00         9. Clothing, laundry, and dry cleaning       9.       \$20.00         10. Personal care products and services       10.       \$10.00         11. Medical and dental expenses       11.       \$5.00         12. Transportation. Include gas, maintenance, bus or train fare.       12.       \$135.00         13. Entertainment, clubs, recreation, newspapers, magazines, and books       13.       \$0.00         14. Charitable contributions and religious donations       14.       \$0.00         15. Insurance.       15a       \$0.00         15b. Insurance deducted from your pay or included in lines 4 or 20.       15a       \$0.00         15c. Vehicle insurance deducted from your pay or included in lines 4 or 20.       15a       \$0.00         15c. Vehicle insurance. Specify:       15d       \$0.00         15c. Vehicle insur	6c. Telephone, cell phone, Internet, satell	ite, and cable services	6c.	\$150.00
8. \$0.00 9. Clothing, laundry, and dry cleaning 9. \$20.00 10. Personal care products and services 10. \$10.00 11. Medical and dental expenses 11. \$5.00 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments 13. Entertainment, clubs, recreation, newspapers, magazines, and books 14. Charitable contributions and religious donations 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15c. Vehicle insurance 15d. Other insurance. Specify: 15d. Too to include taxes deducted from your pay or included in lines 4 or 20. 15r. Insurance. Do not include taxes deducted from your pay or included in lines 4 or 20. 15c. Vehicle insurance 15d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 15d. Taxes pon to include taxes deducted from your pay or included in lines 4 or 20. 15d. Taxes pon to include taxes deducted from your pay or included in lines 4 or 20. 15d. Taxes pon to include taxes deducted from your pay or included in lines 4 or 20. 15d. Taxes pon the insurance. Specify: 16 17a. Car payments for Vehicle 1 17a. Car payments for Vehicle 1 17b. \$0.00 17c. Other. Specify: 17c. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 19. \$0.00 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule 1, Your Income (Official Form 106i). 18. Your payments you make to support others who do not live with you. 19. \$0.00 20. The real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. Property, homeowner's, or renter's insurance 20b. Specify: 20c. Property, homeowner's, or renter's insurance 20c. Property, homeowner's, or renter's insurance 20d. \$0.00	6d. Other. Specify:		6d	\$0.00
9. Clothing, laundry, and dry cleaning       9. \$20.00         10. Personal care products and services       10. \$10.00         11. Medical and dental expenses       11. \$5.00         12. Transportation. Include gas, maintenance, bus or train fare.       12. \$135.00         Do not include: car payments       13. \$0.00         13. Entertainment, clubs, recreation, newspapers, magazines, and books       13. \$0.00         14. Charitable contributions and religious donations       14. \$0.00         15. Insurance.       15.         Do not include insurance deducted from your pay or included in lines 4 or 20.       15a. Life insurance         15c. Vehicle insurance       15b. \$0.00         15c. Vehicle insurance. Specify:       15d       \$0.00         15d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.       15c. Vehicle insurance.       15c. \$207.00         15d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.       \$0.00         17. Installment or lease payments:       17a. \$0.00         17a. Car payments for Vehicle 1       17a. \$0.00         17b. Other. Specify:       17c. \$0.00         17c. Other. Specify:       17c. \$0.00         17c. Other. Specify:       17c. Other. Specify:         17d. Other. Specify:       17c. Other. Specify:         19. Ot	7. Food and housekeeping supplies		7.	\$275.00
10, Personal care products and services   10, \$10.00     11, Medical and dental expenses   11, \$5.00     12, Transportation, Include gas, maintenance, bus or train fare.	8. Childcare and children's education co	sts	8.	\$0.00
11. Medical and dental expenses       11.       \$5.00         12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments       12.       \$135.00         13. Entertainment, clubs, recreation, newspapers, magazines, and books       13.       \$0.00         14. Charitable contributions and religious donations       14.       \$0.00         15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.       15a. Life insurance       15a.       \$0.00         15b. Health insurance       15a.       \$0.00       \$0.00       \$0.00       \$0.00       \$0.00       \$0.00       \$0.00       \$0.00       \$0.00       \$0.00       \$0.00       \$0.00       \$0.00       \$0.00       \$0.00       \$0.00       \$0.00       \$0.00       \$0.00       \$0.00       \$0.00       \$0.00       \$0.00       \$0.00       \$0.00       \$0.00       \$0.00       \$0.00       \$0.00       \$0.00       \$0.00       \$0.00       \$0.00       \$0.00       \$0.00       \$0.00       \$0.00       \$0.00       \$0.00       \$0.00       \$0.00       \$0.00       \$0.00       \$0.00       \$0.00       \$0.00       \$0.00       \$0.00       \$0.00       \$0.00       \$0.00       \$0.00       \$0.00       \$0.00       \$0.00       \$0.00       \$0.00       \$0.00	9. Clothing, laundry, and dry cleaning		9.	\$20.00
12.   Transportation. Include gas, maintenance, bus or train fare. Do not include car payments   12.   \$135.00     13.   Entertainment, clubs, recreation, newspapers, magazines, and books   13.   \$0.00     14.   Charitable contributions and religious donations   14.   \$0.00     15.   Insurance.	10. Personal care products and services		10.	\$10.00
Do not include car payments   13.   13.   13.   13.   13.   13.   13.   13.   13.   14.   14.   14.   14.   14.   14.   15.   14.   15.   14.   14.   14.   14.   14.   14.   14.   14.   15.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.   14.	11. Medical and dental expenses		11.	\$5.00
14. Charitable contributions and religious donations       14. \$0.00         15. Insurance.       50.00         Do not include insurance deducted from your pay or included in lines 4 or 20.       15a. Life insurance       15b. \$0.00         15b. Lefaith insurance       15b. \$0.00       15c. Vehicle insurance       15c. \$207.00         15c. Vehicle insurance. Specify:       15d. \$0.00       \$0.00         16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.       \$9.00       \$0.00         17. Installment or lease payments:       16       \$0.00         17. Locar payments for Vehicle 1       17a. \$0.00       \$0.00         17b. Car payments for Vehicle 2       17b. \$0.00       \$0.00         17c. Other. Specify:       17c. \$0.00       \$0.00         17c. Other. Specify:       17c. \$0.00       \$0.00         18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).       18.         19. Other payments you make to support others who do not live with you.       \$0.00         Specify:       19. \$0.00         20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.       20a. \$0.00         20b. Real estate taxes.       20b. \$0.00         20c. Property, homeowner's, or renter		ce, bus or train fare.	12.	\$135.00
15. Insurance.	13. Entertainment, clubs, recreation, nev	vspapers, magazines, and books	13.	\$0.00
Do not include insurance deducted from your pay or included in lines 4 or 20.   15a. Life insurance   15a   \$0.00     15b. Health insurance   15b   \$0.00     15c. Vehicle insurance   15c   \$207.00     15d. Other insurance. Specify:   15d   \$0.00     15d. Other insurance. Specify:   15d   \$0.00     15d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.   Specify:   16   \$0.00     17b. Installment or lease payments:   17a. Car payments for Vehicle 1   17a   \$0.00     17c. Car payments for Vehicle 2   17b   \$0.00     17c. Other. Specify:   17c   \$0.00     17d. Other. Specify:   17d   \$0.00     18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106).   18.     19. Other payments you make to support others who do not live with you.   Specify:   19. \$0.00     20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.   20a   \$0.00     20b. Real estate taxes.   20b   \$0.00     20c. Property, homeowner's, or renter's insurance   20c   \$0.00     20d. Maintenance, repair, and upkeep expenses.   20d   \$0.00     2	14. Charitable contributions and religious	s donations	14.	\$0.00
15b	101111011011	your pay or included in lines 4 or 20.		
15c. Vehicle insurance	15a. Life insurance		15a	\$0.00
15d. Other insurance. Specify:	15b. Health insurance		15b	\$0.00
Specify:			15c	\$207.00
Specify:	15d. Other insurance. Specify:		15d	\$0.00
17. Installment or lease payments:  17a. Car payments for Vehicle 1  17b. Car payments for Vehicle 2  17b. Car payments for Vehicle 2  17c. Other. Specify:  17c. Other. Specify:  17d. \$0.00  18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).  18. 19. Other payments you make to support others who do not live with you.  Specify:  20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property  20b. Real estate taxes.  20c. Property, homeowner's, or renter's insurance  20d. Maintenance, repair, and upkeep expenses.	16. Taxes. Do not include taxes deducted from	om your pay or included in lines 4 or 20.		
17. Installment or lease payments:  17a. Car payments for Vehicle 1  17b. Car payments for Vehicle 2  17b. Car payments for Vehicle 2  17c. Other. Specify:  17c. Other. Specify:  17d. Other. Specify:  17d. S0.00  18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).  19. Other payments you make to support others who do not live with you.  Specify:  19. \$0.00  20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property  20a \$0.00  20b. Real estate taxes.  20b \$0.00  20c. Property, homeowner's, or renter's insurance  20d. Maintenance, repair, and upkeep expenses.  20d \$0.00	Specify:		16	\$0.00
17b. Car payments for Vehicle 2  17c. Other. Specify:  17c. Other. Specify:  17d. \$0.00  17d. Other. Specify:  17d. \$0.00  18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).  18. 19. Other payments you make to support others who do not live with you.  Specify:  20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property  20a. \$0.00  20b. Real estate taxes.  20c. Property, homeowner's, or renter's insurance  20d. Maintenance, repair, and upkeep expenses.  20d. \$0.00	17. Installment or lease payments:		10	
17c. Other. Specify:	17a. Car payments for Vehicle 1		17a	\$0.00
17d. Other. Specify:	17b. Car payments for Vehicle 2		17b	\$0.00
17d. Other. Specify:	17c. Other. Specify:		17c	\$0.00
your pay on line 5, Schedule I, Your Income (Official Form 106I).  19. Other payments you make to support others who do not live with you.  Specify:  20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property  20a. \$0.00  20b. Real estate taxes.  20c. \$0.00  20c. Property, homeowner's, or renter's insurance  20d. Maintenance, repair, and upkeep expenses.  20d. \$0.00			17d	\$0.00
19. Other payments you make to support others who do not live with you.  Specify:  20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property  20a. \$0.00  20b. Real estate taxes.  20b. \$0.00  20c. Property, homeowner's, or renter's insurance  20c. \$0.00  20d. Maintenance, repair, and upkeep expenses.  20d. \$0.00				\$0.00
Specify:		•	18.	
20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property 20b. Real estate taxes. 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses. 20d. \$0.00	, , , , , , , , , , , , , , , , , , , ,	others who do not live with you.	10	00.00
20a. Mortgages on other property 20a. Mortgages on other property 20b. Real estate taxes. 20b \$0.00 20c. Property, homeowner's, or renter's insurance 20c. Maintenance, repair, and upkeep expenses. 20d \$0.00		uded in lines 4 or 5 of this form or on Schedule I. Your Income	19.	\$0.00
20b. Real estate taxes.  20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses.  20d. So.00 20d. Maintenance, repair, and upkeep expenses.			20a	\$0.00
20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses. 20d. \$0.00				
20d. Maintenance, repair, and upkeep expenses.  20d \$0.00	20c. Property, homeowner's, or renter's i	nsurance		
	20d. Maintenance, repair, and upkeep ex	penses.		
	20e. Homeowner's association or condo	minium dues	20e	\$0.00

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Debtor 1 Samuel	Wade	Case number (if known)	
First Name Middle Name	Last Name		
21.Other. Specify:		21	\$0.00
22. Calculate your monthly expenses.			\$1,762.00
22a. Add lines 4 through 21.			\$0.00
22b. Copy line 22 (monthly expenses for Debtor 2)	, ,,		\$1,762.00
22c. Add line 22a and 22b. The result is your mont	thly expenses.	22.	
23. Calculate your monthly net income.			
23a. Copy line 12 (your combined monthly income	e) from Schedule I.	23a	\$2,417.48
23b. Copy your monthly expenses from line 22 about	ove.	23b	\$1,762.00
23c. Subtract your monthly expenses from your mo	onthly income.		\$655.48
The result is your monthly net income.		23c	
For example, do you expect to finish paying for you mortgage payment to increase or decrease because.  No  Yes  Explain here:			

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Fill in this information to identify your case:						
Debtor 1	Samuel		Wade			
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the:		Northern	District of Illinois (State)			
Case number (If known)			(2.00.2)			

### Official Form 106Dec

### Check if this is an amended filing

### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Par	t 1: Sign Below						
	Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?						
	✓ No						
	Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).					
	Under penalty of perjury, I declare that I have read the summary that they are true and correct.	and schedules filed with this declaration and					
×	/s/ Samuel Wade	×					
	Signature of Debtor 1	Signature of Debtor 2					
	Date 8/31/2017	Date					
	MM/DD/YYYY	MM/DD/YYYY					

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Fill i	n this info	ormation to identify your o	case:					
Deb	tor 1	Samuel First Name	Middle N	Wade ame Last Nan	ne .			
	tor 2 use, if filing)		Middle N					
Unit	ed States	Bankruptcy Court for the:		District of Illing	ois			
Case (If knd	e numbei	r		(Sta	te)			
		Form 107						Check if this is an amended filing
		Form 107 ent of Financia	al Affaire f		<b>F</b> ::::::::::::::::::::::::::::::::::::	D I		04/1
Be a infor num	s compl mation. ber (if k	lete and accurate as po . If more space is need nown). Answer every q	essible. If two ma ed, attach a sepa uestion.	nried people are filing rate sheet to this form	together, both and the top of a	are equally r	esponsible for s	
		ve Details About Your		and where You Lived	Before			
1.		s your current marital st	atus?					
		arried ot married						
2.	During	the last 3 years, have y	ou lived anywhere	other than where you li	ve now?			
	✓ No	o es. List all of the places y	ou lived in the last	3 years. Do not include	where you live no	w.		
	De	ebtor 1:		Dates Debtor 1 lived there	Debtor 2:			Dates Debtor 2 lived there
					Same as E	Debtor 1		Same as Debtor 1
	N	umber Street		From	Number Street			From
	Ci	ity State	Zip Code		City	State	Zip Code	
					Same as D	Debtor 1		Same as Debtor 1
	Nı	umber Street		From	Number Street			From
	Ci	ity State	Zip Code		City	State	Zip Code	
3.	and territ	he last 8 years, did you e tories include Arizona, Calif s. Make sure you fill out S	ornia, Idaho, Louisi	ana, Nevada, New Mexico	, Puerto Rico, Texa			mmunity property states

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Wade

Debtor 1 Samuel Case number (if known) Middle Name First Name Last Name Part 2: Explain the Sources of Your Income Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. Yes. Fill in the details. **Debtor 1** Debtor 2 Sources of income Sources of income **Gross income Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions and exclusions) exclusions) ✓ Wages, Wages, \$27024.00 From January 1 of current year until commissions, commissions, the date you filed for bankruptcy: bonuses, tips bonuses, tips Operating a Operating a business business Wages, \$50000.00 Wages, For last calendar year: commissions, commissions, 2016 (January 1 to December 31, bonuses, tips bonuses, tips YYYY Operating a Operating a business business Wages, Wages, \$60000.00 For the calendar year before that: commissions, commissions. (January 1 to December 31, 2015) bonuses, tips bonuses, tips Operating a Operating a business business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income Gross income from Sources of income Gross income from Describe below. each source Describe below. each source (before deductions and (before deductions and exclusions) exclusions) From January 1 of current year until the date you filed for bankruptcy: For last calendar year: (January 1 to December 31, 2016 For the calendar year before that: (January 1 to December 31, 2015

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Wade Debtor 1 Samuel \_ Case number (if known) Middle Name First Name Last Name List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425\* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. \* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of payment Total amount paid Amount you still owe Was this payment for... Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors

Other

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or 1	1 Samuel			Wa	ade	Case number	(if known)
	First Name		Middle Name	Las	st Name		
nsi orp age	iders include your porations of whic	relatives; and the relatives; ar	any general partners an officer, director, p ness you operate as	; relatives of any person in control,	general partners; par or owner of 20% or	tnerships of which y more of their voting	who was an insider? you are a general partner; g securities; and any managing r domestic support obligations,
<b>✓</b>	No						
	Yes. List all pay	ments to	an insider.	Dalassaf	Tabelanasas	A	Description of the second
				Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
	Insider's Name						
	Number Street						
	City	State	Zip Code				
	Insider's Name		<u> </u>				
	Number Street						
	City	State	Zip Code				
insi	der? ude payments on No	debts gua	aranteed or cosigne	d by an insider.	Total amount paid	Amount you still owe	Reason for this payment  Include creditor's name
	Insider's Name						
	Number Street						
	City	State	Zip Code				
	Insider's Name						
	Number Street						
	City	State	Zip Code				

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Wade Debtor 1 Samuel Case number (if known) Middle Name First Name Last Name Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No ◪ Yes. Fill in the details. Status of the case Nature of the case Court or agency Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Value of the Describe the property Date property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied. Describe the property Date Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied.

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Debto	tor 1 Samuel	Wade	Case number (if known)	
	First Name Middle	Name Last Name		
	Within 90 days before you filed for bank accounts or refuse to make a payment		bank or financial institution, set off any amo	ounts from your
	✓ No ☐ Yes. Fill in the details.			
		Describe the action th	Date action was taken	Amount
	Creditor's Name			
	Number Street			
		Last 4 digits of account	number: XXXX-	
12.		o Code uptov. was any of your property in the	possession of an assignee for the benefit o	f creditors. a court-
	appointed receiver, a custodian, or and			
	✓ No ☐ Yes			
Part !	5: List Certain Gifts and Contribut	tions		
13.	Within 2 years before you filed for bank	kruptcy, did you give any gifts with a	otal value of more than \$600 per person?	
	No Yes. Fill in the details for each gift.			
	Gifts with a total value of more that per person	Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift			
	Number Street			
	,	o Code		
	Person's relationship to you			
	Person to Whom You Gave the Gift			<del>.</del>
	Number Street			
	City State Zip Person's relationship to you	o Code		

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Deb	tor 1	Samuel		Wade	Case number (if kno	wn)	
		First Name Middle	Name	Last Name			
14.	\A/i+	hin 2 years before you filed for bankr	untov did vo	u give any gifte or centr	butions with a total value	of more than \$600	to any charity?
14.	VVII		uptcy, ala yo	u give any gitts or contr	butions with a total value	of more than \$600	to any charity:
	✓	No					
		Yes. Fill in the details for each gift or	contribution.				
		Gifts or contributions to charities		Describe what you con	ntributed	Date you	Value
		that total more than \$600				contributed	
		Charity's Name					
		Onanty 5 Name					
		Number Street					
		City State Zip	Code				
Part	6:	List Certain Losses					
15.		hin 1 year before you filed for bankru	ptcy or since	you filed for bankruptc	, did you lose anything be	cause of theft, fire,	other disaster, or
	gan	nbling?					
	<b>V</b>	No					
	П	Yes. Fill in the details.					
		Describe the property you lost and		Describe ony insurana	e coverage for the loss	Date of your	Value of property
		how the loss occurred			insurance has paid. List	loss	lost
					s on line 33 of <i>Schedule</i>		
				A/B: Property.			
						_	
Pari	7:	<b>List Certain Payments or Transf</b>	ers				
	Incl	ude any attorneys, bankruptcy petition p	oreparers, or c	redit counseling agencies t	or services required in your b	eankruptcy.	
	✓	Yes. Fill in the details.					
				Description and value	of any property	Date payment	Amount of
				transferred		or transfer	payment
						was made	****
		Semrad Law Firm Person Who Was Paid		Attorney's Fee - 200.00		8/30/2017	\$200.00
		20 S. Clark Street					
		Number Street					
		28th Floor					
			603				
		City State Zip	Code				
		Email or website address					
		Email of Webbite address					
		Person Who Made the Payment, if Not	You				
						1	
		Person Who Was Paid					
		Number Street					
		City State Zip	Code				
		<del> </del>					
		Email or website address					
		Person Who Made the Payment, if Not	You				

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Debtor <sup>1</sup>	1 Samuel		Wade Cas	e number (if known)		
	First Name	Middle Name	Last Name	· · · · —		
he	Ip you deal with your cre not include any payment on No	ditors or to make payn	_	lf pay or transfer any	property to anyon	ne who promised to
	Yes. Fill in the details.					
			Description and value of any prope transferred	pa tra	ate An ayment or ansfer was ade	nount of payment
	Person Who Was Paid		-	_		
	Number Street		-			
			-			
	City State	zip Code	-			
	No Yes. Fill in the details.		Description and value of property transferred	Describe any propayments receive in exchange	pperty or ved or debts paid	Date transfer was made
	Person Who Received Tr	ransfer	-	iii Oxonunge		
	Number Street		- -			
	City State Person's relationship to	•	-			
	Person Who Received Tr	ransfer	-			
	Number Street		- -			
	City State Person's relationship to	•	-			
be	neficiary? nese are often called asset- No		d you transfer any property to a self-se	ttled trust or similar	device of which y	ou are a
L	Yes. Fill in the details.		Description and value of the prop	erty transferred		Date transfer was
	Name of trust					made

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Wade Debtor 1 Samuel Case number (if known) Middle Name First Name Last Name List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of account Type of account or Date Last balance account was before number instrument closed, sold, closing or moved, or transfer transferred XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? No Name of Financial Institution Name Yes Number Street Number Street City State Zip Code City Zip Code State 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Do you still Who else had access to it? Describe the contents have it? No Name of Storage Facility Name Number Street Street Number City State Zip Code

City

State

Zip Code

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Wade Debtor 1 Samuel Case number (if known) Middle Name Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. Yes. Fill in the details. Where is the property? Describe the contents Value Owner's Name **NumberStreet** Number Street City State Zip Code City State Zip Code Part 10: **Give Details About Environmental Information** For the purpose of Part 10, the following definitions apply: ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street Number Street City State Zip Code City State Zip Code 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street NumberStreet City State Zip Code City State Zip Code

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Debt	tor 1	Samuel			Wade	C	ase number <i>(i</i>	f known)		
		First Name		Middle Name	Last Name					
26.			y in any judio	ial or administra	ative proceeding ι	under any environm	ental law? Ir	nclude settleme	ents and order	s.
		No Yes. Fill in the def	tails.							
	_				Court or agency		Nature	of the case		Status of the
		Case title								case
					Court Name		-			Pending
		Case number			Number Street		-			On appeal
				;	City Sta	te Zip Code	-			Concluded
Part	¥11.	Give Details Al	oout Your B		onnections to An	•				
						-				
27.	With	-				ss or have any of th	_		any business?	
					-	other activity, eithe lity partnership (LLF		part-time		
		A partner in a			LC) or invided liable	iity pai triersi iip (EEF	-)			
			-		e of a corporation					
		An owner of	at least 5% c	f the voting or e	quity securities of a	a corporation				
	<b>✓</b>	No. None of the a	above applie	s. Go to Part 12.						
		Yes. Check all the	at apply abov	e and fill in the	details below for e					
					Describe the	e nature of the busi	ness		ntification nu al Security nu	
		Business Name			_			EIN:		
		Number Street			_			Dates busine	ss existed	
					Name of acc	ountant or bookke	eper			
		City	State	Zip Code				From	To	
					Describe the	e nature of the busi	ness		ntification nu al Security nu	
		Business Name			_			EIN:		
		Number Street			_			Dates busine	ss existed	
					Name of acc	ountant or bookke	eper			
		City	State	Zip Code				From	To	
					Describe the	e nature of the busi	ness	Employer Ide	ntification nu	mher Do not
					Describe the	, mature of the busi	11033		al Security nu	
		Business Name			_			EIN:		
		Number Street			_			Dates busine	ss existed	
		City	State	Zip Code	Name of acc	ountant or bookke	eper	From	To	
		Oity	State	Zip Oode				From	To	
							1			

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Deb	otor 1	Samuel		Wade	Case number (if known)
		First Name	Middle Name	Last Name	
28.		nin 2 years before you ditors, or other parties.  No  Yes. Fill in the details b		give a financial statement t	o anyone about your business? Include all financial institutions,
				Date issued	
		Ness		MM/DD/YYYY	
		Name		WIW, DD, TTT	
		Number Street			
		City St	ate Zip Code		
Par	t 12:	Sign Below			
	true a	and correct. I understa kruptcy case can resu	nd that making a false stater	nent, concealing property,	s, and I declare under penalty of perjury that the answers are or obtaining money or property by fraud in connection with rears, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
		Signature of			Signature of Debtor 2
		Date 8/31/2	2017		Date
	Did yo	ou attach additional pa lo es ou pay or agree to pay			s Filing for Bankruptcy (Official Form 107)?  cruptcy forms?  Attach the Bankruptcy Petition Preparer's Notice,
	ш'	co. Harrie or person			Declaration and Signature (Official Form 110)

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B2030 (Form 2030) (12/15)

### **UNITED STATES BANKRUPTCY COURT**

Northern District of Illinois

		Northern Dis	strict of illinois				
In re	Samuel Wade			Case No.			
_	Debtor				(If known)		
				Chapter	Chapter 13		
	DISCLOSURE OF CO	OMPENSATI	ON OF ATTO	ORNEY F	OR DEBTOR		
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. compensation paid to me within one year rendered or to be rendered on behalf of t	r before the filing of t	he petition in bankrup	tcy, or agreed to	be paid to me, for services		
	For legal services, I have agreed to accept	ot			\$4,000.00		
	Prior to the filing of this statement I have	e received			\$200.00		
	Balance Due				\$3,800.00		
2.	The source of the compensation paid to	me was:					
	<b>Debtor</b>	Other (spec	ify)				
3.	The source of the compensation paid to	me is:					
	<b>✓</b> Debtor	Other (spec	ify)				
4.	4. I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.						
	I have agreed to share the above-disclosed compensation with a other person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.						
5.	In return for the above-disclosed fee, I ha	ave agreed to render l	egal service for all asp	ects of the bank	ruptcy case, including:		
	<ul> <li>a. Analysis of the debtor's financial bankruptcy;</li> </ul>	situation, and render	ing advice to the debt	or in determinin	g whether to file a petition in		
	b. Preparation and filing of any peti	tion, schedules, state	ments of affairs and p	lan which may b	e required;		
	c. Representation of the debtor at t	he meeting of creditor	rs and confirmation he	earing, and any a	adjourned hearings thereof;		
	d. Representation of the debtor in a	adversary proceedings	and other contested	bankruptcy matt	ers;		
6.	By agreement with the debtor(s), the abo	ve-disclosed fee does	s not include the follo	wing services:			
		CERTIF	FICATION				
	certify that the foregoing is a complete st or(s) in this bankruptcy proceedings.	atement of any agree	ment or arrangement f	or payment to m	ne for representation of the		
	8/31/2017		/s/ Chad	d Mizelle			
	Date		Signature	of Attorney			
			Semrad	Law Firm			
				law firm			

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

#### **Chapter 7: Liquidation**

	\$245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

	\$1,167	filing fee
+	\$550	administrative fee
	\$1,717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.

### Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://www.justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://www.justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to:
<a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit</a>
20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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#### **UNITED STATES BANKRUPTCY COURT**

**Northern District of Illinois** 

In re:	Wade, Samuel  Debtor(s)	Case No	Case No		
		Chapter.	Chapter13		
	VERIFI	CATION OF CREDITOR MAT	TRIX		
TI knowledge		fy that the attached list of creditors is tr	rue and correct to the best of their		
Date:	8/31/2017	/s/ Wade, Samuel Wade, Samuel Signature of Del			

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Santander Consumer USA ATT POC: Janiscia Jackson PO Box 961245 Fort Worth, TX, 76161

L J ROSS ASSOCIATES IN 4 UNIVERSAL WAY JACKSON, MI, 49202

Americash - Bankruptcy 880 Lee Street Suite 302 Des Plaines, IL, 60016

City of Chicago Department of Revenue 121 North LaSalle Street Chicago, IL, 60602

Arnold Scott Harris 111 W. Jackson # 600 Chicago, IL, 60604

IL Tollway PO Box 5544 Chicago, IL, 60608

Credit Box P.O. Box 168 Des Plaines, IL, 60016

Cash City Loans 10334 S. Harlem Palos Hills, IL, 60465

IRS 1 PO Box 7346 Philadelphia, PA, 19101

Village of Oak Park C/O MSB Parking P.O. Box 10479 Newport Beach, CA, 92658

Berwyn Parking Tickets 6401 31st Berwyn, IL, 60402 Case 17-26234 Doc 1 Filed 08/31/17 Entered 08/31/17 13:06:37 Desc Main Document Page 56 of 67

Village of Forest Park 517 Desplaines Ave Forest Park, IL, 60130 Case 17-26234 Doc 1 Filed 08/31/17 Entered 08/31/17 13:06:37 Desc Main Document Page 57 of 67

B2030 (Form 2030) (12/15)

### **UNITED STATES BANKRUPTCY COURT**

Northern District of Illinois

In re	Commed Mode	NOTHERN DISE	_				
-	Samuel Wade  Debtor	****	Case		( known)		
			Chapt		apter 13		
	DISCLOSURE OF CO	MPENSATIC	ON OF ATTOR	VEY FOR DI	EBTOR		
1,	Pursuant to 11 U.S.C. § 329(a) and Fed. B compensation paid to me within one year I rendered or to be rendered on behalf of the	before the filing of the	e petition in bankruptcy, o	r agreed to be paid to	o me, for services		
	For legal services, I have agreed to accept				\$4,000.00		
	Prior to the filing of this statement I have r	eceived			\$200.00		
	Balance Due				\$3,800.00		
2.	The source of the compensation paid to m	e was:	•		- Application of the Control of the		
	<b>2</b> Debtor	Other (specify	<i>/</i> )				
3.	The source of the compensation paid to m	ie is:					
	<b>☑</b> Debtor	Other (specify	<b>/</b> )				
4.	I have not agreed to share the above-omembers and associates of my law firm	disclosed compensati n.	on with any other person ι	unless they are			
	I have agreed to share the above-disclosed compensation with a other person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.						
5.	In return for the above-disclosed fee, I have a. Analysis of the debtor's financial si bankruptcy;			, ,			
	b. Preparation and filing of any petition	on, schedules, statem	ents of affairs and plan wh	ich may be required;			
	c. Representation of the debtor at the	meeting of creditors	and confirmation hearing,	and any adjourned h	nearings thereof;		
	d. Representation of the debtor in adv	versary proceedings a	nd other contested bankru	iptcy matters;			
6.	By agreement with the debtor(s), the above	e-disclosed fee does r	not include the following s	ervices:			
· CERTIFICATION · · ·							
debt	certify that the foregoing is a complete state or(s) in this bankruptcy proceedings.	ement of any agreeme	ent or arrangement for pay	ment to me for repre	sentation of the		
	8/30/2017		/s/ Chad Mizell	е	-		
	Date		Signature of Attori	1ey			
			Semrad Law Fin	n	n digital mananananananananananananananananananan		
			Name of law fim		NOTE OF A CAMPAGE AND A CAMPAG		



### UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

### RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

#### A. BEFORE THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

#### THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.

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6. Advise the debtor of the need to maintain appropriate insurance.

#### B. AFTER THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

#### THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.

8.4

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- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

### C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3.If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.



#### D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
- The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
- Client understands that any funds that client is rendering to The Semrad Law Firm, LLC as part of the advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC in exchange for a commitment by The Semrad Law Firm, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC and will be used for general expense of the firm. Client further understands that it is ordinarily the client's option to deposit funds with an attorney that shall remain client's property as security for future services. However, The Semrad Law Firm, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy cases requires many disparate tasks and functions for the attorney and support staff; some of which require legal expertise while other may be only ministerial in nature. Client further understands that the benefit that client is receiving under the fee arrangement is the commitment of The Semrad Law Firm, LLC to perform any and all work reasonably necessary to represent client's interest absent any extraordinary circumstance.
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

#### E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney.* If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. Improper conduct by the debtor. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.



#### F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00
- 2. In addition, the debtor will pay the filing fee in the case and other expenses of \$371.76
- 3. Before signing this agreement, the attorney has received, \$200.00 toward the flat fee, leaving a balance due of \$3,800.00; and \$61.76 for expenses, leaving a balance due of \$4,171.76
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

Date: 8/30/2017	
Signed: Journal Volume /s/ Samuel Wade	
/s/ Samuel Wade	
	/s/ Chad Mizelle
Debtor(s)	Attorney for Debter(s)

Do not sign if the fee amounts at top of this page are blank.

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Debtor 1 Samuel First Name			se number (Fknowa)	
	estions for Reporting Purposes	st Name		
16. What kind of debts do you have?	16a. Are your debts primarily of "incurred by an individual p. No. Go to line 16b.  Yes. Go to line 17.  16b. Are your debts primarily be money for a business or incurred p. No. Go to line 16c.  Yes. Go to line 17.  16c. State the type of debts your	orimarily for a personal, far pusiness debts? Business restment or through the o	mily, or household properties and the second period of the bus operation of the bus	purpose." at you incurred to obtain iness or investment.
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	☐ No.		any exempt property oute to unsecured cre	is excluded and administrative editors?
18. How many creditors do you estimate that you owe?	1-49 50-99 100-199 200-999	1,000-5,000 5,001-10,000 10,001-25,000	Spransing Sprans	25,001-50,000 50,001-100,000 More than 100,000
19. How much do you estimate your assets to be worth?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 \$10,000,001-\$50 \$50,000,001-\$10 \$100,000,001-\$8	O million T	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
20. How much do you estimate your liabilities to be?  Pariva Sign Below	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 \$10,000,001-\$50 \$50,000,001-\$10 \$100,000,001-\$5	O million 00 million 00 million 00	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
For you	I have examined this petition, and correct.  If I have chosen to file under Chap of title 11, United States Code, I under Chapter 7.  If no attorney represents me and I out this document, I have obtaine I request relief in accordance with I understand making a false stater connection with a bankruptcy cas both. 18 U.S.C. §§ 152, 1341, 15  /s/ Samuel Wade X Signature of Debtor 1  Executed on 8/30/2017	oter 7, I am aware that I may understand the relief available did not pay or agree to pay and and read the notice required the chapter of title 11, Urment, concealing property the can result in fines up to 19, and 3571.	ay proceed, if eligib able under each cha ay someone who is uired by 11 U.S.C. § nited States Code, s v, or obtaining mone	ile, under Chapter 7, 11,12, or 13 apter, and I choose to proceed not an attorney to help me fill § 342(b).  specified in this petition. ey or property by fraud in sonment for up to 20 years, or

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Fill to this into	malion to lolahiiy your easa:				
Debtor 1	Samuel	A CONTRACTOR OF THE PROPERTY O	Wade		
Debtor 2	First Name	Middle Name	Last Name	^^	
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States E	Bankruptcy Court for the: North	em Di	strict of Illinois		
Case number (if known)			(State)		
Official	Form 106Dec	***************************************			Check if this is a amended filing
Declarat	ion About an Indi	vidual Debtor	's Schedule	S	12/1
If two married	people are filing together, both	are equally responsib	le for supplying corre	ct information.	P.D. SONKALSKI SERIO
money or propo	erty by fraud in connection with 1341, 1519, and 3571.	h a bankruptcy case ca	an result in fines up to	Naking a false statement, concealing prop o \$250,000, or imprisonment for up to 20	perty, or obtaining years, or both. 18
Did you p	ay or agree to pay someone wh	o is NOT an attorney t	o help you fill out ban	kruptcy forms?	
<b>∇</b> I No					
Yes. I	Name of person		Attach Bankruptcy Signature (Official F	Petition Preparer's Notice, Declaration, and Form 119),	
Under per that they	naity of perjury, I declare that I are true and correct.	A	ry and schedules filed	with this declaration and	
✗ /s/ Samu Signature o	el Wade \ )CMUU	walls	Scootus	e of Debtor 2	
Date 8/30			Date	MADDAYYY	

MM/DD/YYYY

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Debt	tor 1 Samuel			Wade	Case number (it known)
·	First Name		Middle Name	Last Name	***************************************
28.	✓ No	s before you filed fo other parties. In the details below.	· bankruptoy, did ye	u give a financial state	ment to anyone about your business? Include all financial institutions,
				Date issued	f.
	Name			MM/OC/YYYY	
	Number	Street		_	
	City	State	Zip Code	_	
Pan	и. Sign Be	low			
I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.					
		Signature of Debtor	1 "4 (		Signature of Debtor 2
		Date 8/30/2017			Date
D	id you attach	additional pages to	Your Statement of	Financial Affairs for Indi	viduals Filing for Bankruptcy (Official Form 107)?
The second	No Yes				
Q	id you pay or a	igree to pay someor	ie who is not an att	orney to help you fill ou	t bankruptcy forms?
	No No				
green E E	Yes. Name o	of person			Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).



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### UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

11 tg:	wade, Samuel	Case No	
	Debtor(s)	Case NO.	
		Chapter.	Chapter13
	VERII	FICATION OF CREDITOR MAT	TRIX
Ti knowledge	ne above named Debtors hereby ve e.	erify that the attached list of creditors is tr	rue and correct to the best of their
Date:	8/30/2017	/s/ Wade, Samuel Wade, Samuel Signature of Det	- game are

8.1

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Debt	Or 1 Samuel First Name	Middle Name	Wade Last Name	Case number (it known)	
16		amily income that applies to ye	***************************************		garagara da Amerika da Amerika da Amerika Amerika da Amerika da Amerika da Amerika da Amerika da Amerika da Am
,	16a. Fill in the state in wh		Illinois		
		people in your household.	9		
		mily income for your state and siz	ta né		\$66,487.00
	household		To find	a list of applicable median income amounts, go online	
17.			r this form. This list ma	y also be available at the bankruptcy clerk's office.	
17.	How do the lines compa		o ton of nage 1 of this f	orm, check box 1, <i>Disposable income is not determine</i>	~
	under 11 U.S.C	. § 1325(b)(3). Go to Part 3. Do	NOT fill out Calculation	n of Disposable Income (Official Form 122C-2).	,
	U.S.C. § 1325(i	re than line 16c. On the top of pa b)(3). <b>Go t</b> o Part 3 and filf out C r current monthly income from lin	Calculation of Disposa	k box 2, <i>Disposable income is determined under 11</i> ble Income (Official Form 122C-2). On line 39 of tha	i
Part	Calculate Your Co	ommitment Period Under 1	11 U.S.C. §1325(b)(	4)	
18.	Copy your total average	monthly income from line 11.			53,201.94
19.	Deduct the marital adju- commitment period under	i <b>stment if it applies.</b> If you are r r 11 U.S.C. § 1325(b)(4) allows y	narried, your spouse is	not filing with you, and you contend that calculating th ur spouse's income, copy the amount from line 13.	e
	19a. If the marital adjustm	nent does not apply, fill in 0 on lir	те 19а.		-80.00
	19b. Subtract line 19a f				\$3,201.94
20.	Calculate your current	monthly income for the year. F	ollow these steps:		
	20a. Copy line 19b.		entertain material and a property of the contract of the contr		<u>\$3,201.94</u>
	Multiply by 12 (the r	number of months in a year).			x 12
	205. The result is your cu	rrent monthly income for the yea	r for this part of the form	a.	\$38,423.28
	20c. Copy the median far	nily income for your state and siz	e of household from lin	e 16c.	S66,487.00
21.	How do the lines compa	ire?			
		line 20c. Unless otherwise ordere s 3 years. Go to Part 4.	ed by the court, on the	op of page 1 of this form, check box 3, The	
	Line 20b is more than 4, <i>The commitment</i>	n or equal to line 20c. Unless oth period is 5 years. Go to Part 4.	erwise ordered by the c	ourt, on the top of page 1 of this form, check box	
Paris	Sign Below				
	by signing nere, i dec	sare under penaity or perjury that	the information on this	statement and in any attachments is true and correct.	
	🗶 /s/ Samuel Wa	ide (Vanis) 1 . An	<b>X</b>		
	Signature of Debi	- C/3 11 P X 1927 X / AX X /	<u> </u>	gnature of Debtor 2	
	Date 8/30/2017		D	ate	
	MM/DD/Y	YYY		MM/DD/YYYY	
		to NOT fill out or file Form 122C- Ill out Form 122C-2 and file it wit		of that form, copy your current monthly income from li	ne 14